

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	JB		05-09-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	AK	931	06/06/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
1	
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3	
4	✓ 0
5	0
6	✓ 0
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10	✓
11	✓ 0
12	✓
13	✓
14	✓ 0
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17	✓ 0
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Claim	Date
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BEST AVAILABLE COPY

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here